

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Mag</i>		2/5/00
O.I.P.E. CLASSIFIER		59	55500
FORMALITY REVIEW	<i>100</i>	69935	4-6-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	2/5/00
2	✓	✓	2/5/00
3	✓	✓	2/5/00
4	✓	✓	2/5/00
5	✓	✓	2/5/00
6	✓	✓	2/5/00
7	✓	✓	2/5/00
8	✓	✓	2/5/00
9	✓	✓	2/5/00
10	✓	✓	2/5/00
11	✓	✓	2/5/00
12	✓	✓	2/5/00
13	✓	✓	2/5/00
14	✓	✓	2/5/00
15	✓	✓	2/5/00
16	✓	✓	2/5/00
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25	✓	✓	2/5/00
26	✓	✓	2/5/00
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28	✓	✓	2/5/00
29	✓	✓	2/5/00
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31	✓	✓	2/5/00
32	✓	✓	2/5/00
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42	✓	✓	2/5/00
43	✓	✓	2/5/00
44	✓	✓	2/5/00
45	✓	✓	2/5/00
46	✓	✓	2/5/00
47	✓	✓	2/5/00
48	✓	✓	2/5/00
49	✓	✓	2/5/00
50	✓	✓	2/5/00

Claim	Final	Original	Date
51	✓	✓	2/5/00
52	✓	✓	2/5/00
53	✓	✓	2/5/00
54	✓	✓	2/5/00
55	✓	✓	2/5/00
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62	✓	✓	2/5/00
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77	✓	✓	2/5/00
78	✓	✓	2/5/00
79	✓	✓	2/5/00
80	✓	✓	2/5/00
81	✓	✓	2/5/00
82	✓	✓	2/5/00
83	✓	✓	2/5/00
84	✓	✓	2/5/00
85	✓	✓	2/5/00
86	✓	✓	2/5/00
87	✓	✓	2/5/00
88	✓	✓	2/5/00
89	✓	✓	2/5/00
90	✓	✓	2/5/00
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97	✓	✓	2/5/00
98	✓	✓	2/5/00
99	✓	✓	2/5/00
100	✓	✓	2/5/00

Claim	Final	Original	Date
101			
102			
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If more than 150 claims or 10 actions
 staple additional sheet here

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